

DIRECT DEPOSIT AUTHORIZATION

PLEASE COMPLETE THIS FORM AND RETURN TO: ICS – Attn: Finance Department
2605 S. Oneida St. Suite 106
Green Bay, WI 54304



Phone: (920) 496-1952
Fax: (920) 592-1452
Email: lizke@ics-gb.org or
alexoe@ics-gb.org

Part 1: Transaction Type

New Setup Change financial institution
 Cancellation Change account number

****Additionally, provide the REQUIRED information below****

Account Type: Checking _____ Savings _____

Routing #: _____ Account #: _____

Part 2: Electronic Statement – You can view your monthly statements online at www.hapcheck.com. We do NOT mail paper statements. You will receive an email with your login information once your Direct Deposit Authorization form is entered.

Part 3: Payee Identification

Owner Tax ID (Social Security Number or EIN) _____

Work Phone Number _____

Name _____

Home Phone Number _____

Street Address _____

City _____

State _____

Zip Code _____

****E-Mail Address**** _____

Part 4: Authorization for Setup, Changes, or Cancellation

The individual authorizing must sign, print their name and date the form
NOTE: No alterations to the text in this section will be allowed.

I hereby request and authorize ICS to deposit payments by electronic funds transfer into the account specified below and if necessary debit entries and adjustments for any amounts deposited electronically in error. I recognize that, if I fail to provide complete and accurate information on this authorization form, the processing of the form may be delayed or that my payments may be erroneously transferred electronically.

This authorization will remain in effect until written notice to terminate is given. The undersigned must allow a reasonable amount of time for initiating or terminating Direct Deposit and is responsible for notification of any change in financial institution information.

Authorized Signature _____

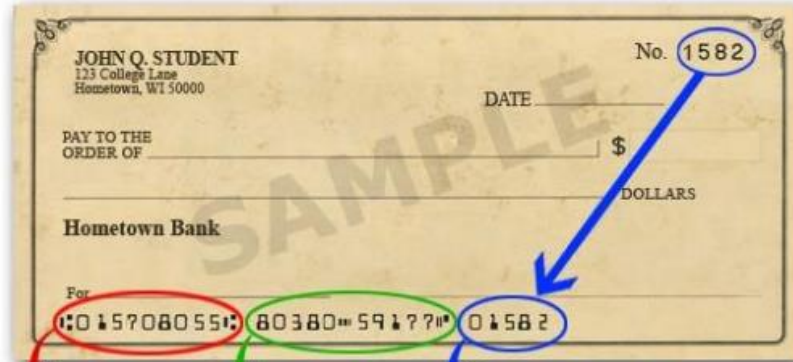
Printed Name _____

Date _____

Important: You must attach a VOIDED CHECK or DIRECT DEPOSIT AUTHORIZATION FORM FROM YOUR FINANCIAL INSTITUTION, identifying the account number and bank routing number. Any returned ACH transactions will be charged a fee.

REQUIRED: If Checking selected attach voided check, if Savings selected attach deposit slip OR letter from bank for either checking or savings.

Sample location of routing transit and account number on a check:



The routing/
transit number is
denoted by nine
digits surrounded
by **⑆**

The checking
account number*

The check number*

*In some cases the order of the
checking account number and
the check number is reversed